

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number CE11014J												
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450"  on: <u>May 15, 2008</u>  Signature     /Silvana Wiltshire/  _____  Typed or printed name     Silvana Wiltshire	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px 5px;">In re Application of</td> <td style="padding: 2px 5px;">ARIEL RUDOLPH</td> </tr> <tr> <td style="padding: 2px 5px;">Application Number</td> <td style="padding: 2px 5px;">10/722,755</td> </tr> <tr> <td style="padding: 2px 5px;">File Date</td> <td style="padding: 2px 5px;">NOVEMBER 26, 2003</td> </tr> <tr> <td style="padding: 2px 5px;">Title</td> <td style="padding: 2px 5px;">SYSTEM AND METHOD FOR PROVIDING A TRANSLATIONAL DICTIONARY</td> </tr> <tr> <td style="padding: 2px 5px;">Art Unit</td> <td style="padding: 2px 5px;">2626</td> </tr> <tr> <td style="padding: 2px 5px;">Examiner</td> <td style="padding: 2px 5px;">OPSASNICK, MICHAEL N.</td> </tr> </table>		In re Application of	ARIEL RUDOLPH	Application Number	10/722,755	File Date	NOVEMBER 26, 2003	Title	SYSTEM AND METHOD FOR PROVIDING A TRANSLATIONAL DICTIONARY	Art Unit	2626	Examiner	OPSASNICK, MICHAEL N.
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Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.  The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) <span style="float: right;">\$ <u>510.00</u></span>  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <span style="float: right;">\$ _____</span>  <input type="checkbox"/> A check in the amount of the fee is enclosed.  <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a Fee Transmittal in duplicate.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any over payment to Deposit Account Number <b>502117, Motorola, Inc.</b> This document is enclosed in duplicate.  <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.  <p style="text-align: center; margin: 0;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>														
I am the  <input type="checkbox"/> applicant/inventor. <span style="float: right;">_____/Larry G. Brown/ Signature</span>  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96) <span style="float: right;">_____ LARRY G. BROWN Typed or printed name</span>  <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>45,834</u> <span style="float: right;">_____ 954-723-6449 Telephone number</span>  <input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). <span style="float: right;">_____ May 15, 2008 Date</span>														
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.														
<input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.														